



BEST AVAILABLE COPY

Page 1 of 4

Docket No.
1502-84PCTUS (S-8503-1-WO)

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed, and for which a patent is sought on the invention entitled

SAFETY SHIELD

the specification of which

(check one)

☐ is attached hereto.

☒ was filed on November 1, 2004 as United States Application No. or PCT International Application

Number PCT/US04/36339

and was amended on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 11g(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

(Number) _____

(Country) _____

(Day/Month/Year Filed) _____

(Number) _____

(Country) _____

(Day/Month/Year Filed) _____

(Number) _____

(Country) _____

(Day/Month/Year Filed) _____



I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

10/698,869	October 31, 2003
Application Serial No.	Filing Date
Application Serial No.	Filing Date
Application Serial No.	Filing Date

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C. F. R. Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

ALL ATTORNEYS AND REGISTERED PRACTITIONERS ASSOCIATED WITH THE UNITED STATES PATENT AND TRADEMARK OFFICE, CUSTOMER NO. 55825.

SEND CORRESPONDENCE TO:

Carter, DeLuca, Farrell & Schmidt, LLP
445 Broad Hollow Road
Suite 225
Melville, New York 11747
Tel.: (631) 501-5700
Fax: (631) 501-3526

DIRECT TELEPHONE CALLS TO:
(Name and telephone number)

Christopher G. Trainor, Esq.
(631) 501-5705

Full Name of fifth inventor James Carlyon		
First inventor's signature <i>James L. Carlyon</i>		Date
Residence: City: Leadwood State, MO Country: US		
FARMINGTON		
Citizenship: U.S.		
Post Office Address: 1254 Pine Street, Leadwood, MO 63053		
3753 HWY 0 FARMINGTON, MO 63640		
Full Name of second inventor, if any: Richard L. Fiser		
Second inventor's signature <i>Richard L. Fiser</i>		Date
Residence: City: Kirkwood State: MO Country: US		
Citizenship: U.S.		
Post Office Address: 27 Orchard Lane, Kirkwood, MO 63122		
Full Name of third inventor, if any: Russell Tartock		
Third inventor's signature		Date
Residence: City: St. Peters State, MO Country: US		
Citizenship: U.S.		
Post Office Address: 16 Armitage Drive, St. Peters, MO 63376-3140		
Full Name of fourth inventor, if any:		
Fourth inventor's signature		Date
Residence: City: State: County:		
Citizenship:		
Post Office Address:		

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Priority Not Claimed

(Number)

(Country)

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DIRECT TELEPHONE CALLS TO:
(Name and telephone number)

Christopher G. Trainor, Esq.
(631) 501-5705

Full Name of first inventor: James Carlyon	
first inventor's signature	Date
Residence: City: Leadwood <i>FARMINGTON</i> State: MO Country: US	
Citizenship: U.S.	
Post Office Address: 1254 Pine Street, Leadwood, MO 63663 <i>3753 Hwy 0 FARMINGTON, MO 63640</i>	

Full Name of second inventor, if any: Richard L. Fiser	
Second inventor's signature	Date
Residence: City: Kirkwood State: MO Country: US	
Citizenship: U.S.	
Post Office Address: 27 Orchard Lane, Kirkwood, MO 63122	

Full Name of third inventor, if any: Russell Tartock	
Third inventor's signature <i>Russell L. Tartock</i>	Date <i>Dec. 11, 2004</i>
Residence: City: St. Peters State: MO Country: US	
Citizenship: U.S.	
Post Office Address: 16 Armitage Drive, St. Peters, MO 63376-3140	

Full Name of fourth inventor, if any:	
Fourth inventor's signature	Date
Residence: City: State: County:	
Citizenship:	
Post Office Address:	